EMPLOYEE CERTIFICATE OF NORTH DAKOTA RESIDENCE

Use this form to terminate withholding Montana-North Dakota Reciprocity Ag		•	•	
I State of North Dakota for purposes of	state individual income t		nat I am a legal residen s in North Dakota is:	t of the
Address I swear (or affirm) that the statements	City s I have made in this cert	State ificate are true and corre	Zip ct.	
Signature		Date		

STATEMENT OF EXPLANATION

Pursuant to statutory authority 15-30-306 Montana and North Dakota have executed a reciprocal income tax agreement whereby Montana will not tax North Dakota residents on income from personal services rendered in Montana, and North Dakota will not tax Montana residents on income from personal services rendered in North Dakota. The exemption is specifically limited to compensation for personal or professional services which is subject to withholding of Federal Income Tax.

Withholding of Montana Income Tax will not be required for the above described compensation paid to an employee who is a North Dakota resident, provided, the employee has furnished his/her employer with Certificated of Residence Form NR-2.

INSTRUCTIONS TO EMPLOYEE

Complete two copies of this form. File one copy with your employer, and mail the other copy to the Business Tax Section, Montana Department of Revenue. PO Box 5835, Helena, MT 59604-5835.